AT A GLANCE • APERÇU

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O'CONNOR NAMED FP OF THE YEAR

Dr. John F. (Jake) O'Connor of Dartmouth, NS, has been named Family Physician of the Year by the College of Family Physicians of Canada. He is the 26th recipient of the award, which honours a frontline caregiver who brings an added human and professional dimension to family medicine.

O'Connor, a 1969 graduate of Dalhousie University, has been practising at the Dartmouth Medical Centre since 1972, and is chief of staff at the Dartmouth General Hospital and assistant professor in Dalhousie University's Faculty of Medicine. He has been active with the provincial medical society for 10 years and was editor of the Nova Scotia Medical Journal.

OTTAWA SEEKS MORE BUSINESS INVOLVEMENT IN AIDS FIGHT

As the number of AIDS cases increases in Canada, says Dr. Hedy Fry, the question is not whether businesses will be affected, but when. Fry, a past president of the British Columbia Medical Association who now sits in the federal cabinet, told the recent XI International Conference on AIDS in Vancouver that people with HIV/AIDS will have cost the health care system more than \$100 000 each by the time they die, with businesses paying an additional \$100 000 to cover employee

benefit plans and facing additional costs to replace workers who become too sick to work because of AIDS. She also noted that the "human capital" destroyed by AIDS reached about \$8 billion in Canada in 1995 and is expected to total \$15 billion annually by 2000.

Fry made the comments while announcing a program that encourages business involvement in activities related to HIV/AIDS. Its first step is development of an HIV/AIDS policy in the workplace, which Fry said is necessary to deal with ignorance among employees. Companies will also be encouraged to provide resources for organizations dealing with HIV/AIDS.

TB DEATHS REACH HISTORIC LEVELS

More people died of tuberculosis (TB) in 1995 than in any other year, says a report released by the World Health Organization (WHO). The report states that nearly 3 million people died of TB in 1995; before that, the highest toll was at the turn of the century, when an estimated 2.1 million people died annually. The WHO report blames the comeback of the disease on poorly maintained and implemented treatment programs in developing countries and the neglect of the problem by developed countries. In 1993, WHO declared a global TB emergency to draw attention to the lack of treatment programs. "The scientists have done their part to help rid the world of TB," said Dr. Arata

Kochi, director of WHO's Global TB Program, "but the politicians have yet to put these tools to use."

WHO recommends a strategy called "DOTS" - directly observed treatment, short-course — to treat TB patients. DOTS directs health care providers to watch patients swallow their medication and track each patient's progress, ensuring that contagious people are cured. The DOTS strategy helps reduce the number of patients who forget or refuse to take their medication, which WHO says are key factors in the global spread of TB. WHO estimates that only 10% of the world's TB patients are being treated using the DOTS strategy, which has proved successful in countries such as China, Tanzania and Peru.

US MDs SEEKING INCOME STABILITY VIA SALARIES

A review of more than 1300 job opportunities for American physicians has revealed that more American physicians than ever before are being offered salaries instead of fee-for-service payments. The 1995–96 review, conducted by the Texas firm of Merritt. Hawkins and Associates, marks the first time in the recruiting firm's history that more than 50% of its assignments featured salaries as the main form of compensation. The percentage of positions offering salaries climbed to 63% in the survey, much higher than the 44% total reached the previous year.

"Salaries have gone from being a curse word among physicians to being the compensation method of choice," said Joseph Hawkins, the firm's chief executive officer. One key reason for the move is the growing popularity of managed care in the US, because salaries are the standard form of physician payment in the managed-care setting. As well, most younger physicians "do not share the prejudice that many older physicians harbour against salaries." Hawkins noted that American residents typically face debts of \$75 000 or more when they enter practice, and this means "the security of a sixfigure salary looks pretty good to them." Salaries reviewed in the survey ranged from an average of \$126 000 for pediatricians to \$220 000 for orthopods.

SMA WARNS THAT FPS ARE LOOKING SOUTH

The Saskatchewan Medical Association News reports that approximately 64% of the province's family physicians have thought about moving to the US and 38% say they want to change practice locations. The findings are the preliminary results from a recent survey of the province's FPs that explored attitudes toward relocating their practices. A comprehensive summary and analysis of the survey, which was conducted by two family-medicine residents, is under way and will be released soon.

Bar-code system eases immunizations

The Richmond, BC, Health Department now has a comprehensive reporting system that maintains immunization records for schoolchildren by employing bar-coded forms. Approximately 25 000 students now

have immunization records in the department's immunization-tracking system, which records the student's name, date of immunization, dose, site, provider, vaccine, lot number and body site. The use of bar-code scanners reduces repetitive data entry and allows some information to be input in advance, instead of at the time of vaccination. A nurse and an assistant can vaccinate approximately 30 patients per hour and update the student's file simply by waving the bar reader over the code.

MEDICAL STUDENT HONOURED BY NATIVE GROUP

Dalhousie University medical student Robert Johnson Jr. has won the National Aboriginal Achievement Award for Youth in recognition of his academic excellence and determination to succeed. The tribute is another in a long list of honours and bursaries presented to Johnson because of his continuing commitment to medical studies, native affairs and volunteer work. Last year the CMA gave him a special bursary that is available for undergraduate aboriginal medical students.

Johnson earned his bachelor of science degree at Dalhousie in 1994 and is a past member of the Minorities in Medicine Committee at Dalhousie's medical school. He has served as the president of university's Aboriginal Students Association and as native delegate on the Canadian Federation of Students and the Student's Union of Nova Scotia.

STUDENTS MORE FOCUSED IN RESIDENCY GOALS

Although the proportion of eligible students applying for residencies in general surgery has dropped since 1993, the number of applications has increased, the Canadian Association of General Surgeons (CAGS) reports. In the 1993 match, 276 of the 1432 participants (19.3%) applied for a residency in general surgery. This year that number dropped to 194 of 1348 participants (14.4%).

Although the figures suggest there has been a decrease in the number of applications for residencies in general surgery, the total number of applications for specific programs in the field has jumped from 1203 in 1993 to 1429 in 1996. Writing in the CAGS Newsletter, Canadian Resident Matching Service Executive Director Sandy Banner said students realize their chance of a successful match to their career choice is excellent (82% of graduates match to their firstchoice discipline) and they apply to more programs within that chosen discipline in an attempt to guarantee acceptance.

Canadians need to live more actively

A recently released report says Canadians are more active now than in 1988 but 35% of them are still "essentially inactive." The report, prepared by Active Living Canada, the Canadian Fitness and Lifestyle Research Institute, the Heart and Stroke Foundation of Canada and Participaction, responds to a similar American report released by the US Surgeon General that discusses physical activity and health. On a positive note, the proportion of physically active Canadians has been growing steadily, rising from 21% in 1981 to 37% today. Both the American and Canadian reports recommend regular moderate physical activity as a way to improve health and well-being. Most experts say the goal should be 30 minutes of exercise, such as brisk walking or stair climbing, daily.